



ATTORNEY DOCKET NO. 04150.0016U1
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of)
EDWIN et al.) Group Art Unit: 2862
Application No. 10/521,820) Examiner: Patidar, Jay M.
Filing Date: May 23, 2005) Confirmation No.: 2413
For: METHOD AND APPARATUS FOR)
DETERMINING THE THICKNESS OF)
A CHROMIUM DEPLETED ZONE OF)
A SURFACE REGION OF A STEEL)
MEMBER)

TRANSMITTAL LETTER

Mail Stop AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

NEEDLE & ROSENBERG, P.C.
Customer Number 23859

November 14, 2007

Sir:

Transmitted herewith is the following in the above-identified application:

- | | |
|--|---|
| <input checked="" type="checkbox"/> Amendment and Response | <input type="checkbox"/> Petition to Extend Time |
| <input type="checkbox"/> Fee as calculated below | <input type="checkbox"/> Supplemental Declaration |
| <input checked="" type="checkbox"/> No Additional Fee Required | <input type="checkbox"/> Terminal Disclaimer |
| <input type="checkbox"/> Replacement Drawings | <input type="checkbox"/> Other _____ |

CLAIMS AS AMENDED							
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA	RATE		ADDITIONAL FEE
Total Claims					X \$50.00		\$0.00
Independent Claims					X \$210.00		\$0.00
<input type="checkbox"/> First Presentation of a Multiple Dependent Claim					+ \$370.00		\$0.00
EXTENSION FEE	1 st Month \$120 <input type="checkbox"/>	2 nd Month \$460 <input type="checkbox"/>	3 rd Month \$1050 <input type="checkbox"/>	4 th Month \$1640 <input type="checkbox"/>	5 th Month \$2230 <input type="checkbox"/>		\$0.00
<input type="checkbox"/> Reduction by ½ for filing by SMALL ENTITY (Note 37 C.F.R. §1.9, §1.27, §1.28) -							- \$0.00
TOTAL FEE DUE							\$0.00

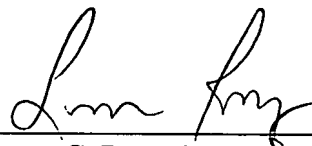
ATTORNEY DOCKET NO. 04150.0016U1
APPLICATION NO. 10/521,820

Payment:

- ☐ A check in the amount of \$_____ is enclosed.
- ☐ Payment by credit card in the amount of \$0.00 for the fees designated below. (Form PTO-2038 enclosed).
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.
- ☐ The Commissioner is authorized to charge our Deposit Account No. 14-0629 in the amount of \$_____ to cover the above-listed additional fees. A duplicate copy of this transmittal is enclosed.
- ☒ In the event of an overpayment or improper payment of a required fee, the Commissioner is authorized to charge or credit our Deposit Account No. 14-0629 as required to correct the error.

Respectfully submitted,

NEEDLE & ROSENBERG, P.C.


Sumner C. Rosenberg
Registration No. 28,753

NEEDLE & ROSENBERG, P.C.
Customer Number 23859
(678) 420-9300
(678) 420-9301 (fax)

CERTIFICATE OF MAILING UNDER 37 C.F.R. § 1.8

I hereby certify that this correspondence, including any items indicated as attached or included, is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop AMENDMENT, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date indicated below.


Sumner C. Rosenberg

11/14/07
Date



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AMENDMENT AND RESPONSE TO OFFICE ACTION

Mail Stop AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

NEEDLE & ROSENBERG, P.C.
Customer Number 23859
November 14, 2007

Sir:

In response to the Official Action dated August 21, 2007, please amend the application as follows:

Amendments to the Claims are reflected in the listing of claims which beings on page 2 of this paper.

Remarks begin on page 5 of this paper.